



March 21, 2012

Members of the Joint Committee on Public Health,

My name is Joe Moore, President of the International Health, Racquet and Sportsclub Association (IHRSA). IHRSA is the health club and fitness industry's leading trade association, representing 72 businesses located throughout Connecticut.

Thank you for the opportunity to comment on **HOUSE BILL 5514** and address an important issue: the nationwide trend to require businesses — not just health clubs — to install automated external defibrillators (AEDs) in their facilities. I am concerned, however, that the bill, as currently written, fails to adequately address two critical issues:

**1) House Bill 5514 does not provide necessary liability protections for Connecticut small business owners and employees**

As currently written, this legislation would enable harsh punishment of well-intentioned employees who either: misdiagnose a health club member's condition, and therefore choose not to use an AED; or panic in an emergency and are unable to use the device. Such a result would be in stark contrast to Good Samaritan statutes that protect and encourage well-intentioned responders. I hope that the legislature is not determined to create tremendous legal liability for health club employees and employers who may be thrust into life threatening medical situations.

**2) House Bill 5514 may adversely impact the response of a trained employee during a cardiac emergency**

As currently written, House Bill 5514 creates a legal jeopardy that incentivizes the use of an AED despite circumstances that call for other treatment. For example, in the event of a member with a blocked airway, a club employee may waste valuable time retrieving the AED when the Heimlich maneuver would be the appropriate treatment. In this case, the employee would know that he/she is more likely to be liable for failure to use an AED than failure to perform the Heimlich maneuver, therefore distorting the traditional analysis of an emergency responder.

**In order to increase public access to defibrillation and protect well-intentioned emergency responders, I respectfully request that the following language be added to HB 6266:**

**Section 21a-223(e) Absent an act or omission constituting gross, willful or wanton negligence, no cause of action shall exist relating to the use or non-use of an automated external defibrillator.**

I sincerely hope that we can work with the members of this Committee to ensure that this language or language similar to it is added in the form of an amendment to HB 6266.

We appreciate the liability protection currently found within § 52-557b of Connecticut's General Statute ("Good Samaritan Law"), and believe that our proposed amendment will simply strengthen the effectiveness of this legislation. I should note that our proposed language is similar to language adopted in several other states. This very approach was enacted into law in 2006 in the Commonwealth of Massachusetts. In fact, nine of the eleven states (including Massachusetts and also Rhode Island) that currently require an AED to be placed in health clubs provide explicit liability protection for the use and non-use of an AED.

Thank you for the opportunity to weigh in on this important matter. If the committee would like any information about AEDs in Connecticut health clubs, please contact Tim Sullivan in our office at [ts@ihrsa.org](mailto:ts@ihrsa.org) or (617) 951-0055.

Sincerely,

Joe Moore  
IHRSA CEO & President